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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Adam First name Michael Middle name Krysowaty Last name and Suffix (Sr., Jr., II, III)	Jessicca First name Lynne Middle name Krysowaty Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6491	xxx-xx-6288

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Debtor 1 Adam Michael Krysowaty
Debtor 2 Jessicca Lynne Krysowaty

Case number (if known)

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Del	otor 2 Jessicca Lynne K	rysowaty			Case numb	Der (if known)	
Par	Tell the Court About	Your Bankrup	otcy Ca	se			
7.	The chapter of the Bankruptcy Code you are			rief description of each, see <i>Notice</i> go to the top of page 1 and check t		342(b) for Individuals Filing for Bankru	ıptcy
	choosing to file under	Chapter	7				
		☐ Chapter	11				
		☐ Chapter	12				
		☐ Chapter	13				
8.	How you will pay the fee	about order.	how you	u may pay. Typically, if you are pay	ring the fee yourself, you	lerk's office in your local court for more may pay with cash, cashier's check, or orney may pay with a credit card or che	r money
		☐ I need	l to pay	the fee in installments. If you choose in Installments (Official Form 103.	oose this option, sign and	I attach the Application for Individuals t	to Pay
		☐ I requiput is applie	est that not requ s to you	my fee be waived (You may required to, waive your fee, and may d	uest this option only if you o so only if your income is pay the fee in installmen	are filing for Chapter 7. By law, a judg s less than 150% of the official poverty its). If you choose this option, you must 3B) and file it with your petition.	line that
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	□ Yes.					
	idat o yeara:		District	Whe	≏n	Case number	
			District	Whe		Case number Case number	
			District	Who		Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
		[District	Whe	ən	Case number, if known	
			Debtor			Relationship to you	
		[District	Whe	en	Case number, if known	
11.	Do you rent your	■ No.	Go to lii	ne 12.			
	residence?	☐ Yes.	Has you	ur landlord obtained an eviction jud	gment against you and d	o you want to stay in your residence?	
				No. Go to line 12.			
			_	Yes. Fill out <i>Initial Statement Abou</i> bankruptcy petition.	t an Eviction Judgment A	Against You (Form 101A) and file it with	ı this

Debtor 1 Adam Michael Krysowaty

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Adam Michael Krysowaty

Debtor 1

Deb	otor 2 Jessicca Lynne K	rysowaty	/		Case number (if known)
Par	Report About Any Bu	ısinesses	You Own	as a Sole Proprie	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	usiness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	ate & ZIP Code
	it to this petition.		Check	the appropriate bo	oox to describe your business:
				Health Care Busin	iness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	al Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))
				Commodity Broke	ser (as defined in 11 U.S.C. § 101(6))
				None of the above	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in	dicate that you are ow statement, and t	e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of I federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am n	ot filing under Char	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ling under Chapter	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	us Property or An	ny Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat	_			
	of imminent and	☐ Yes.	What is t	he hazard?	
	identifiable hazard to public health or safety?				
	Or do you own any				
	property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
					Number, Street, City, State & Zip Code

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Debtor 1 Adam Michael Krysowaty

Debtor 2 Jessicca Lynne Krysowaty

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-08866 Doc 1 Filed 03/21/17 Entered 03/21/17 14:23:52 Desc Main Document Page 6 of 53

	otor 1 Adam Michael K otor 2 Jessicca Lynne		, Document	. 1 age 0 c	Case numbe	er (if known)
Pari	t 6: Answer These Que	stions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.	individual primarily for a persona			ined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily busing money for a business or investment.			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe	that are not consu	mer debts or busines	ss debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.		
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do y are paid that funds will be availa			perty is excluded and administrative expenses ?
	administrative expenses are paid that funds will	5	■ No			
	be available for distribution to unsecure creditors?	ed	☐ Yes			
18.	How many Creditors do	1 -49		1 ,000-5,000		1 25,001-50,000
	you estimate that you owe?	☐ 50-99 ☐ 100-19 ☐ 200-9		□ 5001-10,000 □ 10,001-25,0		☐ 50,001-100,000 ☐ More than100,000
19.	How much do you	s \$0 - \$1	50,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,00 □ \$100,0	01 - \$100,000 001 - \$500,000 001 - \$1 million		1 - \$50 million 1 - \$100 million 01 - \$500 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		— 4000,				·
20.	How much do you estimate your liabilities	\$0 - \$1	,	□ \$1,000,001 □ \$10,000,00		□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion
	to be?		001 - \$100,000 001 - \$500,000		1 - \$30 million	☐ \$1,000,000,001 - \$10 billion
			001 - \$1 million	□ \$100,000,0	01 - \$500 million	☐ More than \$50 billion
Part	7: Sign Below					
For	you	I have ex	amined this petition, and I declare	e under penalty of	perjury that the inform	mation provided is true and correct.
						, under Chapter 7, 11,12, or 13 of title 11, hoose to proceed under Chapter 7.
			rney represents me and I did not tt, I have obtained and read the n			ot an attorney to help me fill out this
		I request	relief in accordance with the chap	pter of title 11, Unit	ed States Code, spe	cified in this petition.
		I understa bankrupto and 3571	cy case can result in fines up to \$	oncealing property, \$250,000, or imprise	or obtaining money on conment for up to 20 y	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		/s/ Adar	n Michael Krysowaty		/s/ Jessicca Lyr	
			lichael Krysowaty of Debtor 1		Jessicca Lynne Signature of Debto	
		Executed	March 21, 2017 MM / DD / YYYY		Executed on Ma	arch 21, 2017 1/DD/YYYY

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Debtor 1 Adam Michael Krys Debtor 2 Jessicca Lynne Kry	•	Page 7 of 53 Cas	se number (if known)
represented by one	under Chapter 7, 11, 12, or 13 of title 11, Un	ited States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by		es, certify that I have no know	vledge after an inquiry that the information in the
	/s/ Christina Banyon Signature of Attorney for Debtor	Date	March 21, 2017 MM / DD / YYYY
_	Christina Banyon Printed name		
ī	Banyon & Scheinbaum, LLC Firm name		
	3077 West Jefferson Street Suite 107 Joliet, IL 60435 Number, Street, City, State & ZIP Code		

Email address

Contact phone

6283282Bar number & State

cbanyon.law@gmail.com

Debtor 1	Adam Michael Krysowaty						
	First Name	Middle Name	Last Name				
Debtor 2	Jessicca Lynne K	Crysowaty					
Spouse if, filing)	First Name	Middle Name	Last Name				
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

you	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		•
Par	11: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,925.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	3,925.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	2,750.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	27,276.36
	Your total liabilities	\$	30,026.36
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,812.52
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,720.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
	■ Yes		
7.	What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Debtor 1 Adam Michael Krysowaty

Debtor 2 Jessicca Lynne Krysowaty Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,866.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

The each category, separately list and describe items. List an asset only once. If an asset fifts in more than one category, list the asset in the category where you ink it fits beat. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), name or every question. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? Part 2: Yes. Where is the property? Poscribe Your Vehicles No you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that omeone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Approximate mileage: 110,000 Who has an interest in the property? Check one Check if this is community property	Debtor 1 Adam Michael Krysowaty First Name Modile Name Last Name Last Name Debtor 2 Secure, # titling Perit Name Modile Name Last Name Modile Name Last Name Debtor 2 Secure, # titling Perit Name Modile Name Last Name Debtor 2 Check if this is arrended filling Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 on	Debtor 1 Adam Michael Krysowaty First Name Middle Name Last Name Debtor 2 (Spouse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number	
Debtor 2 Jossicca Lynne Krysowaty First Name Last Name Last Name Last Name Jossicca Lynne Krysowaty First Name Mode Name Last Name	Debtor 2 Destor A	First Name Middle Name Last Name Debtor 2 Spouse, if filing) Ditted States Bankruptcy Court for the: Difficial Form 106A/B Schedule A/B: Property Reach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category	ended filing
Debtor 2 Jessica Lynne Krysowaty First Name	Debtor 2 Jessica Lynne Krysowaty Midde Name Last Name La	Debtor 2 Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Che ame Official Form 106A/B Schedule A/B: Property The each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category.	ended filing
Scoses, # filing First Name	Soouse # fling) Prisi Name Modile Name Lisa Name	Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Che ame Official Form 106A/B Schedule A/B: Property The each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category.	ended filing
Check if this is amended filling Difficial Form 106A/B Schedule A/B: Property 12/15 Property Property 12/15 Property 12/15 Property 12/15 Property 12/15 Property Prope	Check if this i amended filin Difficial Form 106A/B Schedule A/B: Property reach category, separately list and describe terns. List an asset only once. If an asset fits in more than one category, list the asset in the category where in this this bast. Be as complete and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct which the beat. Be as complete and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct which the beat. Be as complete and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct property as a second people and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct property as a second people and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct property and continued to the category where in the property? In the category superately list and describe terms. List an asset only once in filing together, both are equally responsible for supplying correct where the accurate people where the category described in the category where in the property? In the category superately list and described in the category where in the property? In the category people and accurate as possible. If we are filing together, both and equally responsible for supplying correct property? In the category as equally responsible for supplying correct property? In the category and the category a	Official Form 106A/B Schedule A/B: Property The each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category.	ended filing
Difficial Form 106A/B Schedule A/B: Property 12/15 Schedule A/B: Property 12/16 Schedule	Difficial Form 106A/B Schedule A/B: Property 12/ 12/ 12/ 12/ 12/ 12/ 12/ 12	Official Form 106A/B Schedule A/B: Property each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category	ended filing
As a category, separately list and describe items. List an asset only once. If an asset fills in more than one category, list the asset in the category where you wink if this best. De as complete and accurred as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Part 12	Describe A/B: Property acac category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where its fits it is the act complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), name every question. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? The control of the service of th	Schedule A/B: Property each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category	12/15
As a category, separately list and describe items. List an asset only once. If an asset fills in more than one category, list the asset in the category where you wink if this best. De as complete and accurred as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Part 12	Describe A/B: Property acac category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where its fits it is the act complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), name every question. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? The control of the service of th	Schedule A/B: Property each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category	12/15
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			\$2,200.00
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Official Form 106A/B Schedule A/B: Property page 1

☐ Yes

	Coop 17 00000	Dec 1	F:1 o d 00/01/17	Finto ro d 00/01/17 1 4:0	20:52 Dogo Main
		Doc 1	Document	Entered 03/21/17 14:2 Page 11 of 53	23:52 Desc Main
Debtor 1 Debtor 2	Adam Michael Kryso Jessicca Lynne Krys			Case number	(if known)
				om Part 2, including any entries fo	
Part 3: De	scribe Your Personal and Ho	usehold Items	3		
Do you ov	vn or have any legal or eq	uitable intere	est in any of the follow	ring items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Exampl ■ No	old goods and furnishings es: Major appliances, furnitu Describe		nina, kitchenware		
■ No				oment; computers, printers, scanners	s; music collections; electronic devices
8. Collectii Exampl	bles of value es: Antiques and figurines; pother collections, memo			oks, pictures, or other art objects; sta	amp, coin, or baseball card collections;
9. Equipm Exampl	ent for sports and hobbieses: Sports, photographic, exmusical instruments Describe		other hobby equipment;	bicycles, pool tables, golf clubs, skis	s; canoes and kayaks; carpentry tools;
10. Firearr <i>Examp</i> ■ No		s, ammunition	ı, and related equipmen	t	
□ No	s bles: Everyday clothes, furs, Describe	leather coats	s, designer wear, shoes	, accessories	
	Used C	lothing of E	Debtors		\$500.0
■ No □ Yes. 13. Non-fa Examp			engagement rings, wed	ding rings, heirloom jewelry, watches	s, gems, gold, silver

14. Any other personal and household items you did not already list, including any health aids you did not list

2 Pembrook Corgies, 1 Lab, 1 Cat

■ No

☐ Yes. Give specific information.....

\$100.00

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Debtor 1 Debtor 2		Case number (if known)	
	d the dollar value of all of your entries fro Part 3. Write that number here	om Part 3, including any entries for pages you have attached	\$600.00
Part 4:	Describe Your Financial Assets	_	
	own or have any legal or equitable intere	st in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	mples: Money you have in your wallet, in yo	ur home, in a safe deposit box, and on hand when you file your petition	n
Exa	institutions. If you have multiple acco	accounts; certificates of deposit; shares in credit unions, brokerage hounts with the same institution, list each.	ouses, and other similar
□ No ■ Ye	S	Institution name:	
	17.1.	First Community Bank and Trust - Checking	\$15.00
	17.2.	First Community Bank and Trust - Checking	\$110.00
	17.3.	First Community Bank and Trust Zero Balance	\$0.00
Exai	ds, mutual funds, or publicly traded stocl		
■ No □ Ye	sInstitution or iss	suer name:	
	tventure	corporated and unincorporated businesses, including an interest	in an LLC, partnership, and
	s. Give specific information about them Name of entity:		
Neg	otiable instruments include personal checks -negotiable instruments are those you cann	negotiable and non-negotiable instruments , cashiers' checks, promissory notes, and money orders. ot transfer to someone by signing or delivering them.	
☐ Ye	s. Give specific information about them Issuer name:		
		(k), 403(b), thrift savings accounts, or other pension or profit-sharing p	lans
	s. List each account separately. Type of account:	Institution name:	
You	mples: Agreements with landlords, prepaid r	de so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications compani	es, or others
	S	Institution name or individual:	
23. Ann ı ■ No		money to you, either for life or for a number of years)	

Case 17-08866 Doc 1 Filed 03/21/17 Entered 03/21/17 14:23:52 Desc Main Page 13 of 53 Document Debtor 1 **Adam Michael Krysowaty** Jessicca Lynne Krysowaty Debtor 2 Case number (if known) ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

Official Form 106A/B Schedule A/B: Property page 4

■ No

Case 17-08866 Doc 1 Filed 03/21/17 Entered 03/21/17 14:23:52 Desc Main Document Page 14 of 53 Debtor 1 **Adam Michael Krysowaty** Jessicca Lynne Krysowaty Debtor 2 Case number (if known) ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$125.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$3,200.00 57. Part 3: Total personal and household items, line 15 \$600.00 Part 4: Total financial assets, line 36 \$125.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$3,925.00 Copy personal property total \$3,925.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$3.925.00

Official Form 106A/B Schedule A/B: Property page 5

					Page 15 of 53	
ы	in this inform	nation to identify your case:	Document			
De	btor 1	Adam Michael Krysow	vaty			
		First Name	Middle Name	L	ast Name	
_	btor 2 ouse if, filing)	Jessicca Lynne Kryso First Name	waty Middle Name	L	ast Name	
Un	ited States Bar	nkruptcy Court for the: NO	RTHERN DISTRICT OF	II I ING	OIS	
		The aprey Court for the Trans.				
	se number					Check if this is an amended filing
O	ficial Fo	rm 106C				
S	chedule	e C: The Prope	erty You Cla	im	as Exempt	4/16
the nee	property you lis	sted on <i>Schedule A/B: Proper</i> d attach to this page as many	rty (Official Form 106A/B)	as yo	our source, list the property that you	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
spe any fun exe	cific dollar and applicable standard applicable standard applicable under the control of the con	nount as exempt. Alternative atutory limit. Some exempti nlimited in dollar amount. H	ely, you may claim the f ons—such as those for lowever, if you claim an	ull fai healt exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	One way of doing so is to state a eing exempted up to the amount of penefits, and tax-exempt retirement are under a law that limits the t, your exemption would be limited
		to the Durantes Version Oleton as	s Exempt			
Pa	rt 1: Identif	y the Property You Claim as	2 Exempt			
		exemptions are you claim as		n if yo	our spouse is filing with you.	
	Which set of		ng? Check one only, eve	•	, ,	
	Which set of ■ You are cla	exemptions are you claimir	ng? Check one only, eve ankruptcy exemptions.	•	, ,	
1.	Which set of ■ You are cla □ You are cla	exemptions are you claiming aiming state and federal nonbaiming federal exemptions. 1	ng? Check one only, eve ankruptcy exemptions. 1 U.S.C. § 522(b)(2)	11 U.S	, ,	
1.	Which set of ■ You are cla □ You are cla For any prop Brief description	exemptions are you claiming aiming state and federal nonbaiming federal exemptions. 1	ng? Check one only, eve ankruptcy exemptions. 1 U.S.C. § 522(b)(2)	11 U.S	S.C. § 522(b)(3)	Specific laws that allow exemption
1.	Which set of ■ You are cla □ You are cla For any prop Brief description	exemptions are you claiming aiming state and federal nonbaiming federal exemptions. 1 perty you list on Schedule A. on of the property and line on	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as execution of the	empt,	S.C. § 522(b)(3) fill in the information below.	Specific laws that allow exemption
1.	Which set of ■ You are cla □ You are cla For any prop Brief descriptic Schedule A/B to	exemptions are you claiming aiming state and federal nonbaiming federal exemptions. 1 perty you list on Schedule Alon of the property and line on that lists this property	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as execution you own Copy the value from	empt,	S.C. § 522(b)(3) fill in the information below. ount of the exemption you claim	Specific laws that allow exemption 735 ILCS 5/12-1001(c)
1.	Which set of ■ You are cla □ You are cla For any prop Brief descriptic Schedule A/B to	exemptions are you claiming aiming state and federal nonbaiming federal exemptions. 1 perty you list on Schedule Alon of the property and line on that lists this property	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as execute continuous con	empt,	fill in the information below. count of the exemption you claim eck only one box for each exemption.	
1.	Which set of ■ You are cla □ You are cla For any prop Brief descriptic Schedule A/B to 1995 Volvo Line from Sch	exemptions are you claiming state and federal nonbaiming state and federal nonbaiming federal exemptions. 1 serty you list on Schedule Aon on of the property and line on that lists this property 850 110,000 miles medule A/B: 3.2	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as execute continuous con	empt, Ama	fill in the information below. count of the exemption you claim eck only one box for each exemption. \$2,400.00 100% of fair market value, up to	
1.	Which set of ■ You are cla □ You are cla For any prop Brief descriptic Schedule A/B to 1995 Volvo Line from Sch	exemptions are you claiming state and federal nonbaiming state and federal nonbaiming federal exemptions. 1 perty you list on Schedule Alon of the property and line on that lists this property 850 110,000 miles medule A/B: 3.2	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) //B that you claim as executed by the portion you own Copy the value from Schedule A/B \$2,200.00	empt, Ama	fill in the information below. count of the exemption you claim eck only one box for each exemption. \$2,400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
1.	Which set of ■ You are cla □ You are cla For any prop Brief descriptic Schedule A/B to 1995 Volvo Line from Sch Used Clothi Line from Sch	exemptions are you claiming state and federal nonbaiming state and federal nonbaiming federal exemptions. 1 serty you list on Schedule Aon on of the property and line on that lists this property 850 110,000 miles medule A/B: 3.2	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) //B that you claim as executed by the portion you own Copy the value from Schedule A/B \$2,200.00	empt, Ama	fill in the information below. count of the exemption you claim cck only one box for each exemption. \$2,400.00 100% of fair market value, up to any applicable statutory limit \$500.00 100% of fair market value, up to	735 ILCS 5/12-1001(c)
1.	Which set of ■ You are cla □ You are cla For any prop Brief descriptic Schedule A/B to 1995 Volvo Line from Sch Used Clothi Line from Sch First Comm Checking	exemptions are you claiming state and federal nonbaiming state and federal nonbaiming federal exemptions. 1 serty you list on Schedule Aon of the property and line on that lists this property 850 110,000 miles nedule A/B: 3.2	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as execution of the portion you own Copy the value from Schedule A/B \$2,200.00	empt, Ama	fill in the information below. ount of the exemption you claim eck only one box for each exemption. \$2,400.00 100% of fair market value, up to any applicable statutory limit \$500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(a)
1.	Which set of You are cla You are cla For any prop Brief description Schedule A/B to 1995 Volvo Line from Sch Used Clothic Line from Sch First Comm Checking Line from Sch	exemptions are you claiming state and federal nonbaiming state and federal nonbaiming federal exemptions. 1 serty you list on Schedule Ao on of the property and line on that lists this property 850 110,000 miles nedule A/B: 3.2 ing of Debtors nedule A/B: 11.1	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as execution of the portion you own Copy the value from Schedule A/B \$2,200.00	American Chee	fill in the information below. count of the exemption you claim eck only one box for each exemption. \$2,400.00 100% of fair market value, up to any applicable statutory limit \$500.00 100% of fair market value, up to any applicable statutory limit \$15.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(a)

■ No

Official Form 106C

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes Case 17-08866 Doc 1 Filed 03/21/17 Entered 03/21/17 14:23:52 Desc Main Document Page 16 of 53

Debtor 1 Adam Michael Krysowaty
Debtor 2 Jessicca Lynne Krysowaty

Case number (if known)

	Document	Page 17	7 of 53		
Fill in this information to identify	y your case:				
Debtor 1 Adam Micha	ael Krysowaty				
First Name	Middle Name	Last Name		-	
Debtor 2 Jessicca Lv	nne Krysowaty				
(Spouse if, filing) First Name	Middle Name	Last Name		-	
	" NODTHERN DIOTRICT OF ILL	INICIO			
United States Bankruptcy Court for	r the: NORTHERN DISTRICT OF ILL	INOIS			
Case number					
(if known)				☐ Check	if this is an
				_	led filing
					.oug
Official Form 106D					
-	oro Who Hove Claims	Cooura	d by Dranart	. ,	40/45
Schedule D: Credito	ors Who Have Claims	<u>Secure</u>	a by Propert	<u>y </u>	12/15
Be as complete and accurate as poss	sible. If two married people are filing togeth	er, both are ec	ually responsible for su	upplying correct informa	tion. If more space
is needed, copy the Additional Page, t	fill it out, number the entries, and attach it				
number (if known).					
1. Do any creditors have claims secur	red by your property?				
□ No. Check this box and sub	omit this form to the court with your other	schedules. Y	ou have nothing else t	to report on this form.	
Yes. Fill in all of the informa	ation below.				
Part 1: List All Secured Claim	IS		Column A	Column B	Column C
	has more than one secured claim, list the cre		,	Value of collateral	Unsecured
	or has a particular claim, list the other creditor nabetical order according to the creditor's nam		Amount of claim Do not deduct the	that supports this	portion
	-		value of collateral.	claim	If any
2.1 Midwest Title Loans	Describe the property that secures	the claim:	\$550.00	\$2,200.00	\$0.00
Creditor's Name	1995 Volvo 850 110,000 mile	s			
	As of the date you file, the claim is:	Check all that			
530 S Main Street	apply.	Orieck all triat			
Bourbonnais, IL 60914	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as	mortgage or sec	cured		
Debtor 2 only	car loan)				
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtors and anot	ther				
☐ Check if this claim relates to a	☐ Other (including a right to offset)				
community debt	cc. (c.ag ag				
Date debt was incurred	Last 4 digits of account num	ber			
				.	
2.2 One Main	Describe the property that secures		\$2,200.00	\$1,000.00	\$1,200.00
Creditor's Name	2007 Pontiac Grand Prix 14	5,000			
	miles				
DO Dow 700200	As of the date you file, the claim is:	Check all that			
PO Box 790368	apply.				
Saint Louis, MO 63179	Contingent				
Number, Street, City, State & Zip Code	1				
	Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as	mortgage or ser	cured		
Debtor 2 only	car loan)				
■ Debtor 1 and Debtor 2 only	\square Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtors and anot	ther				
☐ Check if this claim relates to a	☐ Other (including a right to offset)				
community debt	. 5 5				
Data daht was insured	Look 4 digito of account	hor			
Date debt was incurred	Last 4 digits of account num	ner			

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Debtor 1	Adam Micha	ael Krysowaty		Case number (if know)	
	First Name	Middle Name	Last Name		
Debtor 2	Jessicca Ly	nne Krysowaty			
	First Name	Middle Name	Last Name		
				<u> </u>	
Add the	dollar value of y	our entries in Column A on t	this page. Write that number here:	\$2,750.00	
	the last page of at number here:	your form, add the dollar va	lue totals from all pages.	\$2,750.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Ouse	, 11 00000 E	Documer	nt Page 19 of 53	14.20.02	o mani
Fill in th	nis informati	ion to identify your o				
Debtor 1	1	Adam Michael Kry	/sowatv			
200101		First Name	Middle Name	Last Name		
Debtor 2		Jessicca Lynne K	rysowaty			
(Spouse if,	filing)	First Name	Middle Name	Last Name		
United S	States Bankrı	uptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Case nu	ımber					
(if known)						heck if this is an
					aı	mended filing
Officia	al Form 1	106E/F				
			ho Have Unsecu	red Claims		12/15
any execu Schedule Schedule eft. Attac	utory contract G: Executory D: Creditors	ts or unexpired leases Contracts and Unexpi Who Have Claims Secu Juation Page to this pag	that could result in a claim. red Leases (Official Form 10 ıred by Property. If more spa	RIORITY claims and Part 2 for creditors Also list executory contracts on Schet leGg). Do not include any creditors with ace is needed, copy the Part you need, at to report in a Part, do not file that Par	dule A/B: Property (Official partially secured claims fill it out, number the ent	al Form 106A/B) and on that are listed in ries in the boxes on the
Part 1:	List All of	f Your PRIORITY Un	secured Claims			
1. Do a	ny creditors l	nave priority unsecured	d claims against you?			
■ N	lo. Go to Part 2	2.				
ΠY	es.					
Part 2:	List All of	Your NONPRIORIT	Y Unsecured Claims			
3. Do a	ny creditors l	nave nonpriority unsec	ured claims against you?			
	lo. You have n	othing to report in this pa	art. Submit this form to the cou	rt with your other schedules.		
■ Y	es.					
unse	cured claim, list one creditor h	st the creditor separately	for each claim. For each claim	er of the creditor who holds each claim in listed, identify what type of claim it is. Do If you have more than three nonpriority ur	o not list claims already inc	luded in Part 1. If more
						Total claim
	APS Billing	<u> </u>	Last 4 digits	of account number	_	\$574.00
	Nonpriority Cro PO Box 55		When was the	e debt incurred?		
	Carol Stre	am, IL 60197				
		t City State Zlp Code	As of the date	e you file, the claim is: Check all that ap	pply	
		I the debt? Check one.	_			
	Debtor 1 o	-	☐ Contingent			
	Debtor 2 o	•	☐ Unliquidate	∍d		
	Debtor 1 a	nd Debtor 2 only	☐ Disputed			
	☐ At least on	e of the debtors and and		PRIORITY unsecured claim:		
		his claim is for a comn				
	debt Is the claim s	ubject to offset?	☐ Obligations report as prior	s arising out of a separation agreement or rity claims	r divorce that you did not	
	■ No	•	·	ension or profit-sharing plans, and other s	similar debts	
	☐ Yes		Other. Spe	ecify Medical		

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	Adam Michael Krysowaty Jessicca Lynne Krysowaty	Case number (if know)	
4.2	Bioreference Labs	Last 4 digits of account number	\$2,245.00
	Nonpriority Creditor's Name PO Box 26548 Salt Lake City, UT 84126	When was the debt incurred?	. ,
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
	Bioreference Labs Nonpriority Creditor's Name	Last 4 digits of account number	\$2,245.00
_	481 Edward Ross Drive Elmwood Park, NJ 07407	When was the debt incurred?	
_	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
	CCS Payment Processing Center Nonpriority Creditor's Name	Last 4 digits of account number	\$107.00
	PO Box 55126 Boston, MA 02205	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Collection	

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	Adam Michael Krysowaty Jessicca Lynne Krysowaty	Case number (if know)	
4.5	Children's Surgical Foundation Nonpriority Creditor's Name	Last 4 digits of account number 9543	\$743.00
	737 N. Michigan Avenue, Suite 1650 Chicago, IL 60611	When was the debt incurred?	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.6	Comenity - Game Stop	Last 4 digits of account number	\$250.00
	Nonpriority Creditor's Name PO Box 659820	When was the debt incurred?	
	San Antonio, TX 78265 Number Street City State Zlp Code	As of the data you file the plains in Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	Debtor 2 only	☐ Contingent	
	_	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	_	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
1	0 Hz 0 Hz 1 D		4004.00
4.7	Creditors Collections Bureau Nonpriority Creditor's Name	Last 4 digits of account number	\$221.00
	PO Box 63	When was the debt incurred?	
-	Kankakee, IL 60901 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	on on the same of	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection	

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	1 Adam Michael Krysowaty 2 Jessicca Lynne Krysowaty	Case number (if know)	
4.8	CVS Coram	Last 4 digits of account number	\$675.00
	Nonpriority Creditor's Name PO Box 809141 Chicago, IL 60680	When was the debt incurred?	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.9	Discover Nonpriority Creditor's Name	Last 4 digits of account number	\$1,289.00
	PO Box 6103 Carol Stream, IL 60197	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.1	ICS Collection Service	Last 4 digits of account number	\$137.00
	Nonpriority Creditor's Name PO Box 1010 Tinley Park, IL 60477	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collection	

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	Adam Michael Krysowaty Jessicca Lynne Krysowaty	Case number (if know)	
4.1	Lab Corp of America Nonpriority Creditor's Name PO Box 2240 Burlington, NC 27216 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Medical	\$72.00
_	Lurie Childrens	Last 4 digits of account number 6175	\$2,586.00
	Nonpriority Creditor's Name PO Box 4066 Carol Stream, IL 60197	When was the debt incurred?	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
	Main Street Dentistry Nonpriority Creditor's Name	Last 4 digits of account number	\$81.00
	801 Main Street NW	When was the debt incurred?	
_	Bourbonnais, IL 60914		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
		- Pressy	

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	or 1 Adam Michael Krysowaty or 2 Jessicca Lynne Krysowaty	Case number (if know)	
4.1 4	Maurices	Last 4 digits of account number	\$679.00
	Nonpriority Creditor's Name PO Box 659705	When was the debt incurred?	
	San Antonio, TX 78265	- A Market Marke	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	Contingent	
	<u> </u>	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.1 5	Medical Business Bureau	Last 4 digits of account number	\$28.00
	Nonpriority Creditor's Name		<u> </u>
	PO Box 1219	When was the debt incurred?	
	Park Ridge, IL 60068 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the diam is. Oncok an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only		
		☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection	
4.1	Medical Group of Kankakee		↑145.00
6	Nonpriority Creditor's Name	Last 4 digits of account number	\$145.00
	55 E. North Street, Suite E	When was the debt incurred?	
	Bradley, IL 60915		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	Other. Specify Medical	

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	or 1 Adam Michael Krysowaty or 2 Jessicca Lynne Krysowaty	Case number (if know)	
4.1 7	Medical Recovery Specialists	Last 4 digits of account number	\$1,241.00
	Nonpriority Creditor's Name 2250 E. Devon Street, Suite 352 Des Plaines, IL 60018	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection	
4.1 8	New Lenox Fire Protection	Last 4 digits of account number	\$1,901.00
	Nonpriority Creditor's Name PO Box 457 Wheeling II 60000	When was the debt incurred?	
	Wheeling, IL 60090 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.1 9	One Main Financial	Last 4 digits of account number	\$1,283.00
	Nonpriority Creditor's Name PO Box 742536	When was the debt incurred?	
	Cincinnati, OH 45274 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no or and date year may also status of or or an area appropriately	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other Specify Personal Loan	
		-1 /	

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	1 Adam Michael Krysowaty 2 Jessicca Lynne Krysowaty	Case number (if know)	
4.2 0	Pediatric Anesthesia Assoc.	Last 4 digits of account number	\$165.00
	Nonpriority Creditor's Name PO Box 3526 Carol Stream, IL 60132	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.2	Presence Health	Last 4 digits of account number	\$221.00
<u>'</u>	Nonpriority Creditor's Name		•
	Patient Financial Services	When was the debt incurred?	
	1643 Lewis Avenue, Suite 203 Billings, MT 59102		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.2	Presence Saint Joseph Medical		¢4.44.00
2	Cente Nonpriority Creditor's Name	Last 4 digits of account number	\$141.00
	62314 Collection Center Drive Chicago, IL 60693	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Medical	

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	Adam Michael Krysowaty Jessicca Lynne Krysowaty	Case number (if know)						
4.2	Rush University Medical Center	Last 4 digits of account number	\$28.00					
	Nonpriority Creditor's Name PO Box 4075	When was the debt incurred?						
	Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Medical						
4.2	Silver Cross Hospital	Last 4 digits of account number 4279	\$9,437.36					
	Nonpriority Creditor's Name 1900 Silver Cross Blvd New Lenox, IL 60451	When was the debt incurred?						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	☐ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	□ Unliquidated						
	■ Debtor 1 and Debtor 2 only	□ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Medical						
4.2	State Farm Bank	Last 4 digits of account number	\$776.00					
5 .	Nonpriority Creditor's Name PO Box 23025	When was the debt incurred?	•					
	Columbus, GA 31902							
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	Debtor 1 only	П						
	Debtor 2 only	☐ Contingent						
	_	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:						
	At least one of the debtors and another	Student loans						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	□ Yes	■ Other. Specify Credit Card						
		— Other, Specify	Specify Credit Card					

		chael Krysowaty Lynne Krysowaty	Document	Paye 20		ပ umber (if kr	now)		
0 111	Iliam Slav		Last 4 digits of acco	ount number					\$6.00
On	npriority Cred ne N. Mair nnteno, IL	n Street	When was the debt	incurred?					
Nur	mber Street (City State Zlp Code	As of the date you f	ile, the claim is	: Check	all that app	ly		
Wh	o incurred t	he debt? Check one.							
	Debtor 1 only	y	☐ Contingent						
	Debtor 2 only	у	☐ Unliquidated						
	Debtor 1 and	Debtor 2 only	☐ Disputed						
	At least one	of the debtors and another	Type of NONPRIOR	ITY unsecured	claim:				
	Check if this	s claim is for a community	☐ Student loans						
debt Is the claim subject to offset?				☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No			Debts to pension	or profit-sharing	plans, a	and other sir	milar debts		
	Yes		Other. Specify	Medical					
5. Use this pa is trying to have more	age only if yo collect from than one c	to Be Notified About a Debout have others to be notified alto myou for a debt you owe to son reditor for any of the debts that in Parts 1 or 2, do not fill out or	out your bankruptcy, fo neone else, list the origi you listed in Parts 1 or 2	r a debt that yo	Parts 1	or 2, then li	st the collectio	n agency her	e. Similarly, if you
Name and A	ddress		On which entry in Part 1 or		ist the o	riginal credit	or?		
IC Systen			ine 4.25 of (<i>Check one</i>):		Part 1: (Creditors wit	h Priority Unsec	ured Claims	
PO Box 6	4378			-	Part 2: (Creditors wit	h Nonpriority Ur	nsecured Clain	ns
Saint Pau	II, MN 551		ast 4 digits of account nu	mber					
Dort 4	A al al 4 b a . A w	manusta far Fack Time of Uni	accured Claim						
6. Total the a		nounts for Each Type of Unscertain types of unsecured clain im.		or statistical re	porting	purposes o	only. 28 U.S.C.	§159. Add the	amounts for each
					_		Total Claim		
Total claims	ı	Domestic support obligations			6a.	\$		0.00	
from Part 1		Taxes and certain other debts	you owe the governmer	nt	6b.	\$		0.00	
	0-	Olaima fan daath an mananalis		!	0-				

				To	tal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				То	tal Claim
Total	6f.	Student loans	6f.	\$	0.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	27,276.36
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	27,276.36

		DUGUITIE	III Paue 29 01 33	
Fill in this infor	mation to identify your	case:		
Debtor 1	Adam Michael Kr	ysowaty		
	First Name	Middle Name	Last Name	
Debtor 2	Jessicca Lynne k	Crysowaty		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with v	vhom you have the Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	

	0000 17 00000 1	Docume	nt Page 30 o	of 53	2 Describant
Fill in this ir	nformation to identify your	case:			
Debtor 1	Adam Michael Kr	ysowaty			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Jessicca Lynne K	Krysowaty Middle Name	Last Name		
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe	er				
(if known)					Check if this is an amended filing
Official	Form 106H				3
Schedu	ıle H: Your Cod	ebtors			12/15
people are fi ill it out, and our name a	ling together, both are equa	ally responsible for supp boxes on the left. Attach . Answer every question.	lying correct informati the Additional Page to	ion. If more space is ne o this page. On the top	e as possible. If two married eded, copy the Additional Page, of any Additional Pages, write
-	(ii.)	, ou alog a joint ouco, o	o not not oune, opouco	ao a coacs.c	
■ No					
☐ Yes					
	n the last 8 years, have you California, Idaho, Louisiana,				states and territories include
■ No. G	Go to line 3.				
☐ Yes. I	Did your spouse, former spou	ıse, or legal equivalent live	with you at the time?		
in line 2	e again as a codebtor only it 16D), Schedule E/F (Official	f that person is a guarant	or or cosigner. Make :	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	olumn 1: Your codebtor me, Number, Street, City, State and ZI	P Code		Column 2: The cred Check all schedules	litor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	ame			☐ Schedule E/F, lin	ne
				☐ Schedule G, line	
	umber Street			_	
Cit	ty	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			☐ Schedule E/F, lin	
				☐ Schedule G, line	
Nu	ımber Street			_	

State

City

ZIP Code

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	in this information to identify your otor 1 Adam Mich										
		ael Krysowaty				_					
	otor 2 Jessicca L	ynne Krysowaty				_					
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF ILL	INOIS		_					
	se number		_				Check if this is	:			
(If kr	nown)						☐ An amende				
									ving postpetition or following date:	chapter	
0	fficial Form 106l						MM / DD/ `	/YYY			
S	chedule I: Your Ind	ome								12/1	
atta Par	use. If you are separated and you have a separate sheet to this form t 1: Describe Employmen	. On the top of any additi									
1.	Fill in your employment information.		Debtor	1			Debtor	2 or non	-filing spouse		
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Emp	■ Employed				oyed			
			☐ Not	□ Not employed Retail				mployed	I		
	employers.	Occupation	Retail					_ead			
	Include part-time, seasonal, or self-employed work.	Employer's name	Targe	t			Target				
	Occupation may include student or homemaker, if it applies.	Employer's address									
		How long employed t	here?	6 months	i			I.5 year	·s		
Par	t 2: Give Details About Mo	onthly Income									
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have	nothing to repo	ort for	any	line, write \$0 in the	space. I	Include your non-	-filing	
	u or your non-filing spouse have n e space, attach a separate sheet t		ombine the	e information fo	or all e	emplo	oyers for that perso	on on the	e lines below. If yo	ou need	
							For Debtor 1		Debtor 2 or filing spouse		
2.	List monthly gross wages, sal deductions). If not paid monthly				2.	\$	1,336.55	\$	2,533.18		
3.	Estimate and list monthly ove	rtime pay.			3.	+\$	0.00	+\$	0.00		

1,336.55

2,533.18

Calculate gross Income. Add line 2 + line 3.

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Copy line 4 here	Debi	tor 1 tor 2	Adam Michael Krysowaty Jessicca Lynne Krysowaty	_		Ca	ase number (<i>if ki</i>	nown)				
Se. List all payroll deductions: 1. List all payroll deductions: 5a. \$ 285.24 \$ 551.53 2. Se. Tax. Medicare, and Social Security deductions 5a. \$ 285.24 \$ 551.53 2. Se. Tax. Medicare, and Social Security deductions 5b. \$ 0.00 \$ 0.00 2. Se. Voluntary contributions for retirement plans 5b. \$ 0.00 \$ 0.00 3. Required repayments of retirement fund ions 5c. \$ 0.00 \$ 0.00 3. Required repayments of retirement fund ions 5c. \$ 0.00 \$ 0.00 4. Se. Se.						F	For Debtor 1		F	or Debto	² 2 or	
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions 5c. Voluntary contrib		Cop	y line 4 here	4.		\$	1,330	6.55				_
5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Insurance 5c. So. 0.00 \$ 0.00 5c. Insurance 5c. So. 0.00 \$ 0.00 5c. Insurance 5c. Voluntary contributions for vertirement fund loans 5c. Voluntary Contributions for vertirement fund for vertire fund fund for vertire fund fund for vertire fund for vertire fund fund for vertire fund fund fund fund fund fund fund fund	5.	List	all payroll deductions:									
5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Insurance 5c. So. 0.00 \$ 0.00 5c. Insurance 5c. So. 0.00 \$ 0.00 5c. Insurance 5c. Voluntary contributions for vertirement fund loans 5c. Voluntary Contributions for vertirement fund for vertire fund fund for vertire fund fund for vertire fund for vertire fund fund for vertire fund fund fund fund fund fund fund fund		5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	28	5.24	. \$	i	551.53	
5d. Required repayments of retirement fund loans 5e. Insurance 5e. Insurance 5f. Domestic support obligations 5f. S. 0.00 \$ 187.94 5f. Domestic support obligations 5f. S. 0.00 \$ 0.00 5g. Union dues 5f. Obmestic support obligations 5f. Sh. ** 0.00 \$ 0.00 5f. Other deductions. Specify: ** tbco 5f. Other government and property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. Net income from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include allinony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8c. Social Security 8d. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance hat you receive, such as food stanspic (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 9g. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. ** \$ 0.00 11. ** \$ 1,761.21 ** \$ 2,812.52 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. Do you expect an increase or decrease within the year after yo		5b.	· · · · · · · · · · · · · · · · · · ·	5b	э.				_ :			_
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_	13.	Do y	•	?							monthl	y income
		_										

Fill i	n this informa	ition to identify yo	ur case:							
Debt		Adam Michae		Natv		Ch	ack	if this is:		
	01 1	Auaiii Wiiciia	ei Kiyso	waty				n amended filing		
Debt	or 2 use, if filing)	Jessicca Lyn	ne Krys	owaty					wing postpetition chapte the following date:	∍r
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Unite	ed States Bankı	ruptcy Court for the:	NORTH	IERN DISTRICT OF ILLI	NOIS		М	M / DD / YYYY		
1	e number own)									
Of	ficial Fo	rm 106J								
Sc	hedule	J: Your I	Exper	ises					1:	2/1
Be a	s complete rmation. If m	and accurate as	possible. eded, atta	If two married people a						
Part		ribe Your House	hold							
1.	Is this a joir ☐ No. Go to									
	_	es Debtor 2 live i	n a separ	ate household?						
	■ N									
		-	t file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of De	ebtoi	· 2.		
2.	Do you have	e dependents?	□ No							
	Do not list D Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto			Dependent's age	Does dependent live with you?	
	Do not state	the			_				□ No	
	dependents	names.			Son		_		■ Yes □ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
3.		oenses include		No						
		f people other th d your depender		Yes						
Part	2: Estim	ate Your Ongoir	na Monthi	v Expenses						
Esti exp	mate your ex	cpenses as of yo	our bankrı	uptcy filing date unless y is filed. If this is a sup						
the	value of suc	h assistance and		government assistance luded it on <i>Schedule I:</i>				Your exp	ansas	
(Oii	icial Form 10	юі.)						Tour Cxp		
4.		or home ownersl and any rent for the		ses for your residence. r lot.	Include first mortgag	e 4.	\$		600.00	
	If not include	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
	4b. Prope	rty, homeowner's				4b.	\$		0.00	
		maintenance, re				4c.			0.00	
5.		owner's associati nortgage payme		dominium dues o ur residence, such as h	ome equity loans	4d. 5.	\$		0.00	

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Debtor 1 Debtor 2		Case num	Case number (if known)				
6. Uti	lities:						
6a.	Electricity, heat, natural gas	6a.	\$	300.00			
6b.	Water, sewer, garbage collection	6b.	\$	100.00			
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	2,200.00			
6d.	Other. Specify:	6d.	\$	0.00			
. Fo	od and housekeeping supplies	7.	\$	0.00			
Ch	ildcare and children's education costs	8.	\$	0.00			
. Clo	othing, laundry, and dry cleaning	9.	\$	0.00			
). Pe	rsonal care products and services	10.	\$	0.00			
1. M e	dical and dental expenses	11.	\$	0.00			
2. Tra	insportation. Include gas, maintenance, bus or train fare.		_	000.00			
	not include car payments.	12.	· ·	200.00			
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00			
I. Ch	aritable contributions and religious donations	14.	\$	0.00			
	urance.						
	not include insurance deducted from your pay or included in lines 4 or 20.	45-	•	2.22			
	a. Life insurance	15a.		0.00			
	b. Health insurance	15b.	·	0.00			
	c. Vehicle insurance	15c.	*	120.00			
	d. Other insurance. Specify:	15d.	\$	0.00			
Sp	kes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	16.	\$	0.00			
	tallment or lease payments:	17a.	¢.	200.00			
	a. Car payments for Vehicle 1		·	200.00			
	o. Car payments for Vehicle 2	17b. 17c.	· ·	0.00			
	c. Other Specify:		·	0.00			
	d. Other. Specify:	17d.	\$	0.00			
	ur payments of alimony, maintenance, and support that you did not report ducted from your pay on line 5, Schedule I, Your Income (Official Form 106		\$	0.00			
	ner payments you make to support others who do not live with you.	1).	\$	0.00			
	ecify:	19.	Ψ	0.00			
	ner real property expenses not included in lines 4 or 5 of this form or on So		our Income				
	a. Mortgages on other property	20a.		0.00			
	o. Real estate taxes	20b.		0.00			
	c. Property, homeowner's, or renter's insurance	20c.	·	0.00			
	d. Maintenance, repair, and upkeep expenses	20d.	· ·	0.00			
	e. Homeowner's association or condominium dues	20e.	·	0.00			
_	ner: Specify:		+\$	0.00			
i. Oti	The control of the co		·Ψ	0.00			
2. Ca	culate your monthly expenses						
	a. Add lines 4 through 21.		\$	3,720.00			
22	o. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$	_			
220	c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,720.00			
3. Ca	culate your monthly net income.						
238	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,812.52			
	o. Copy your monthly expenses from line 22c above.	23b.	-\$	3,720.00			
	• •						
230	 Subtract your monthly expenses from your monthly income. The result is your monthly net income. 	23c.	\$	-907.48			
For	you expect an increase or decrease in your expenses within the year after example, do you expect to finish paying for your car loan within the year or do you expect y diffication to the terms of your mortgage? No.			e or decrease because of a			
	Yes Explain here:						

Fill in this infor	mation to identify your	case:		
Debtor 1	Adam Michael Kr	vsowaty		
200101 1	First Name	Middle Name	Last Name	
Debtor 2	Jessicca Lynne K	Crysowaty		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check if this is an amended filing
	tion About a		Debtor's Schedu	
obtaining money years, or both. 1		n connection with a banl		false statement, concealing property, or to \$250,000, or imprisonment for up to 20
		one who is NOT an attor	ney to help you fill out bankruptcy	forms?
■ No				
☐ Yes. N	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed with this	declaration and
X /s/ Ada	am Michael Krysowa	ty	X /s/ Jessicca Lynne I	Krysowaty
Adam	Michael Krysowaty re of Debtor 1	-	Jessicca Lynne Kry Signature of Debtor 2	
Date	March 21, 2017		Date _ March 21, 20 1	7

Fill	in this inform	nation to identify your	case:				
_	btor 1	Adam Michael K					
De	DIOI I	First Name	Middle Name	Last Name			
De	btor 2	Jessicca Lynne					
(Sp	ouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Cou		kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS			
Case number					_	☐ Check if this is an amended filing	
St		of Financial		duals Filing for B		4/16	
info	rmation. If m		attach a separate sheet to		equally responsible for sup additional pages, write you		
Pa	rt 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before			
1.	What is your	/hat is your current marital status?					
	MarriedNot mar	ried					
2. During the last 3 years, have you lived anywhere other than where you live now?							
	 ■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. 						
	Debtor 1 Pr	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there	
3. stat					ity property state or territory ico, Texas, Washington and W		
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	edule H: Your Codebtors (O	fficial Form 106H).			
Dα	art 2 Explain the Sources of Your Income						
га	Ехріаі	Title Sources of Tou	liicome				
4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.						
	□ No						
	Yes. Fill	in the details.					
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$2,067.47	■ Wages, commissions, bonuses, tips	\$4,308.52	
			☐ Operating a business		☐ Operating a business		

Official Form 107

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Debtor 1 **Adam Michael Krysowaty** Jessicca Lynne Krysowaty Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$0.00 \$43,015.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$0.00 \$65,806.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address** Dates of payment Total amount Amount you Was this payment for ... still owe paid Karen Krysowaty Jan, Feb, March \$1,200.00 \$0.00 ☐ Mortgage Rent ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors

Other

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Debtor 1 **Adam Michael Krysowaty** Debtor 2 Jessicca Lynne Krysowaty Case number (if known) Creditor's Name and Address Amount you Dates of payment Total amount Was this payment for ... still owe paid First Midwest Title Loan Jan, Feb, March \$600.00 \$0.00 ☐ Mortgage **Car Payment** Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address **Dates of payment Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο П Yes

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	btor 2		Case number	(if known)	
Par	rt 5: List Certain Gifts and Contributions	•			
					•
3.	■ No	uptcy,	did you give any gifts with a total value of more t	ınan \$600 per person	<i>(</i>
	☐ Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$600 per person	0	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
4.	Within 2 years before you filed for bankru	uptcy,	did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	■ No				
	Yes. Fill in the details for each gift or co			D-1	Walana
	Gifts or contributions to charities that to more than \$600 Charities Name		Describe what you contributed	Dates you contributed	Value
	Address (Number, Street, City, State and ZIP Code	*)			
Par	rt 6: List Certain Losses				
5.	Within 1 year before you filed for bankrup or gambling?	ptcy o	r since you filed for bankruptcy, did you lose any	thing because of the	t, fire, other disaster,
	■ No				
	☐ Yes. Fill in the details.				
	Describe the property you lost and	Descr	ibe any insurance coverage for the loss	Date of your	Value of property
			e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	loss	lost
			nice claims of line 33 of Schedule Arb. Property.		
Par	rt 7: List Certain Payments or Transfers	3			
6.	consulted about seeking bankruptcy or p	orepari	lid you or anyone else acting on your behalf pay ing a bankruptcy petition? rs, or credit counseling agencies for services require		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid		Description and value of any property	Date payment	Amount of
	Address Email or website address		transferred	or transfer was made	payment
	Person Who Made the Payment, if Not Y	ou			
	Banyon & Scheinbaum, LLC 3077 West Jefferson Street Suite 107		\$750 (AF) + \$335 (FF) = \$1,085		\$1,085.00
	Joliet, IL 60435				
7.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	litors o		or transfer any prope	rty to anyone who
	■ No				
	☐ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Adam Michael Krysowaty Debtor 1 Jessicca Lynne Krysowaty Debtor 2

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.						
	Person Who Received Transfer Address Person's relationship to you	Description and vo		paymen	e any property or its received or debts exchange	Date transfer was made	
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-protein No Yes. Fill in the details.		y property to a se	elf-settled	trust or similar device o	of which you are a	
	Name of trust	Description and v	alue of the prope	erty transfe	erred	Date Transfer was made	
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ	, were any financial accour	counts or instrun	nents held			
	■ No Yes. Fill in the details.	ations, and other man	olai mottationo.				
	Name of Financial Institution and	Last 4 digits of account number	Type of accoun instrument	1	Date account was closed, sold, noved, or cransferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		escribe th	e contents	Do you still have it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe th	e contents	Do you still have it?	
Par	rt 9: Identify Property You Hold or Control fo	or Someone Else					
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
	Yes. Fill in the details.	NATIONAL TO THE OWNER.		· · · · · · · · · · · · · · · · · · ·		Value	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		escribe th	e property	Value	
Par	rt 10: Give Details About Environmental Infor	rmation					
For	the purpose of Part 10, the following definition	ns apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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Adam Michael Krysowaty Debtor 1 Debtor 2 Jessicca Lynne Krysowaty

Case number (if known)

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used							
	to own, operate, or utilize it, including disposal sites.							
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,								
	hazardous material, pollutant, contaminant	, or similar term.						
Rep	ort all notices, releases, and proceedings th	at you know about, regardless of wher	they occurred.					
24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	No							
	☐ Yes. Fill in the details.							
	Name of site	Governmental unit	Environmental law, if you	Date of notice				
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	know it					
25.	Have you notified any governmental unit of No	any release of hazardous material?						
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	t 11: Give Details About Your Business or	Connections to Any Business						
27.	Within 4 years before you filed for bankrup	tcy, did you own a business or have an	y of the following connections to an	y business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	■ No. None of the above applies. Go to Part 12.							
	☐ Yes. Check all that apply above and fill	I in the details below for each business	i.					
	Business Name	Describe the nature of the business	Employer Identification number					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	number or IIIN.				
28.	Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	■ No							
	☐ Yes. Fill in the details below.							

Part 12: Sign Below

Date Issued

Name Address

(Number, Street, City, State and ZIP Code)

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Debioi	Adam wiichael Krysowaty			
Debtor 2	Jessicca Lynne Krysowaty		Case number (if known)	
are true a	ind correct. I understand that making a fa	alse statement	t, concealing property, or obtaining money or property by fraud in connection	'n
	nkruptcy case can result in fines up to \$2			
18 U.S.C.	§§ 152, 1341, 1519, and 3571.	•	•	
/s/ Adan	n Michael Krysowaty	/s/ Je	essicca Lynne Krysowaty	
	lichael Krysowaty		icca Lynne Krysowaty	
	e of Debtor 1	Signat	ature of Debtor 2	
Date M	larch 21, 2017	Date	March 21, 2017	
Did you a	ttach additional pages to Your Statemen	t of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
■ No				
☐ Yes				
Did you p	ay or agree to pay someone who is not a	an attorney to I	help you fill out bankruptcy forms?	
■ No				
☐ Yes. Na	ame of Person Attach the Bankrup	tcy Petition Pre	eparer's Notice, Declaration, and Signature (Official Form 119).	

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Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Adam Michael Kr						
	First Name	Middle Name	Last Name				
Debtor 2	Jessicca Lynne k	Crysowaty					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case number							
(if known)				☐ Check if this is an			
				amended filing			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Midwest Title Loans name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of 1995 Volvo 850 110,000 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's One Main	■ Surrender the property.	□No
name:	☐ Retain the property and redeem it.	<u>_</u>
Description of 2007 Pontiac Grand Prix	☐ Retain the property and enter into a Reaffirmation Agreement.	Yes
property 145,000 miles securing debt:	☐ Retain the property and [explain]:	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

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Debtor Debtor	, ,	Case number (if known)
	r's name: ption of leased ty:	□ No
	r's name: ption of leased tty:	□ No □ Yes
	r's name: ption of leased tty:	□ No □ Yes
	r's name: ption of leased tty:	□ No
	r's name: ption of leased ty:	□ No □ Yes
	r's name: ption of leased tty:	□ No □ Yes
	r's name: ption of leased ty:	□ No □ Yes
		I my intention about any property of my estate that secures a debt and any personal
A	s/ Adam Michael Krysowaty dam Michael Krysowaty ignature of Debtor 1	X /s/ Jessicca Lynne Krysowaty Jessicca Lynne Krysowaty Signature of Debtor 2
D	March 21, 2017	Date March 21, 2017

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-08866 Doc 1 Filed 03/21/17 Entered 03/21/17 14:23:52 Desc Main Document Page 49 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

_	Adam Michael Krysowaty		a	
In re	Jessicca Lynne Krysowaty	Debtor(s)	Case No. Chapter	7
		Decici(s)	Chapter	·
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	RNEY FOR DE	EBTOR(S)
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20160 ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	750.00
	Prior to the filing of this statement I have received		\$	750.00
	Balance Due			0.00
2. T	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. T	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are mem	bers and associates of my law firm.
[☐ I have agreed to share the above-disclosed compensations of the agreement, together with a list of the narrows.			
5. I	n return for the above-disclosed fee, I have agreed to re	ender legal service for all aspect	s of the bankruptcy c	ase, including:
b c.	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credite [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on how 	ement of affairs and plan which ors and confirmation hearing, an reduce to market value; exe ons as needed; preparation	may be required; ad any adjourned hear	rings thereof;
6. B	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any adv	e does not include the following versary proceeding.	service:	
		CERTIFICATION		
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Ma	arch 21, 2017	/s/ Christina Bany		
Da	ite	Christina Banyon		
		Signature of Attorne Banyon & Schein		
		3077 West Jeffers	son Street	
		Suite 107 Joliet, IL 60435		
		cbanyon.law@gm	nail aam	
		Name of law firm	iaii.coiii	

United States Bankruptcy Court Northern District of Illinois

In re	Adam Michael Krysowaty		Case No.	
mie	Jessicca Lynne Krysowaty	Debtor(s)	Chapter	7
	VERI	IFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors: _	29
	The above-named Debtor(s) he (our) knowledge.	ereby verifies that the list of creditor	ors is true and	correct to the best of my
Date:	March 21, 2017	/s/ Adam Michael Krysowaty Adam Michael Krysowaty		
Date:	March 21, 2017	Signature of Debtor /s/ Jessicca Lynne Krysowaty		
		Jessicca Lynne Krysowaty Signature of Debtor		

APS Billing PO Box 5594 Carol Stream, IL 60197

Bioreference Labs PO Box 26548 Salt Lake City, UT 84126

Bioreference Labs 481 Edward Ross Drive Elmwood Park, NJ 07407

CCS Payment Processing Center PO Box 55126 Boston, MA 02205

Children's Surgical Foundation 737 N. Michigan Avenue, Suite 1650 Chicago, IL 60611

Comenity - Game Stop PO Box 659820 San Antonio, TX 78265

Creditors Collections Bureau PO Box 63 Kankakee, IL 60901

CVS Coram PO Box 809141 Chicago, IL 60680

Discover PO Box 6103 Carol Stream, IL 60197

IC System
444 Highway 96 East
PO Box 64378
Saint Paul, MN 55164

ICS Collection Service PO Box 1010 Tinley Park, IL 60477

Lab Corp of America PO Box 2240 Burlington, NC 27216

Lurie Childrens PO Box 4066 Carol Stream, IL 60197

Main Street Dentistry 801 Main Street NW Bourbonnais, IL 60914

Maurices PO Box 659705 San Antonio, TX 78265

Medical Business Bureau PO Box 1219 Park Ridge, IL 60068

Medical Group of Kankakee 55 E. North Street, Suite E Bradley, IL 60915

Medical Recovery Specialists 2250 E. Devon Street, Suite 352 Des Plaines, IL 60018

Midwest Title Loans 530 S Main Street Bourbonnais, IL 60914

New Lenox Fire Protection PO Box 457 Wheeling, IL 60090

One Main PO Box 790368 Saint Louis, MO 63179

One Main Financial PO Box 742536 Cincinnati, OH 45274 Pediatric Anesthesia Assoc. PO Box 3526 Carol Stream, IL 60132

Presence Health
Patient Financial Services
1643 Lewis Avenue, Suite 203
Billings, MT 59102

Presence Saint Joseph Medical Cente 62314 Collection Center Drive Chicago, IL 60693

Rush University Medical Center PO Box 4075 Carol Stream, IL 60197

Silver Cross Hospital 1900 Silver Cross Blvd New Lenox, IL 60451

State Farm Bank PO Box 23025 Columbus, GA 31902

William Slavin One N. Main Street Manteno, IL 60950